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Dated: November 20, 2002

Signature:

*Ronnie Webb*  
(Ronnie Webb)

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TECH CENTER 1600/2900  
Docket No.: HO-P02086US1  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Dr. James R. Lupski, et al.

Application No.: 10/021,955

Group Art Unit: 1645

Filed: December 13, 2001

Examiner: Not Yet Assigned

For: **DEFECTS IN PERIAXIN ASSOCIATED  
WITH MYELINOPATHIES**

**INFORMATION DISCLOSURE STATEMENT (IDS)**

Commissioner for Patents  
Washington, DC 20231

Dear Sir:

Pursuant to 37 CFR 1.56, the attention of the Patent and Trademark Office is hereby directed to the references listed on the attached PTO/SB/08. It is respectfully requested that the information be expressly considered during the prosecution of this application, and that the references be made of record therein and appear among the "References Cited" on any patent to issue therefrom.

This Information Disclosure Statement is filed before the mailing date of a first Office Action on the merits as far as is known to the undersigned.

A copy of each reference on PTO/SB/08 is attached.

While the information and references disclosed in this Information Disclosure Statement may be "material" pursuant to 37 CFR 1.56, it is not intended to constitute an admission that any patent, publication or other information referred to therein is "prior art" for this invention unless specifically designated as such.

In accordance with 37 CFR 1.97(g), the filing of this Information Disclosure Statement shall not be construed to mean that a search has been made or that no other material information as defined in 37 CFR 1.56(a) exists. It is submitted that the Information

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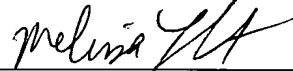
Disclosure Statement is in compliance with 37 CFR 1.98 and the Examiner is respectfully requested to consider the listed references.

The Commissioner is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 06-2375, under Order No. HO-P02086US1.

Dated: November 20, 2002

Respectfully submitted,

By



Melissa L. Sistrunk

Registration No.: 45,579

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#6/1508 1645  
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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	<b>Application Number</b>	10/021,955	
	<b>Filing Date</b>	December 13, 2001	
	<b>First Named Inventor</b>	Dr. James R. Lupski	
	<b>Group Art Unit</b>	1645	
	<b>Examiner Name</b>	Not Yet Assigned	
<b>Total Number of Pages in This Submission</b>	5	<b>Attorney Docket Number</b>	HO-P02086US1

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**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)  IDS by Applicant Copies of 24 references Postcard
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

<b>Firm or Individual Name</b>	FULBRIGHT & JAWORSKI L.L.P. Melissa L. Sistrunk
<b>Signature</b>	<i>Melissa Sistrunk</i>
<b>Date</b>	November 20, 2002

**Transmittal**

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IDS (Citation) by Applicant